



920.326.5193 Randolph  
608.251.4318 Madison  
800.321.5193 Toll Free  
563.203.0182 Cresco, IA  
920.326.5209 Fax

**Well Drilling, Inc.**  
*"Well Worth It"*

P.O. Box 150  
Randolph, WI 53956

April 23, 2014

Paul Kozol  
Wisconsin Department of Natural Resources  
Private Water Systems Section  
Bureau of Drinking Water and Ground Water  
101 S Webster Street  
P.O. Box 7921  
Madison, WI 53707-7921

**RE: High Capacity Well Application for the Experimental Aircraft Association (EAA), P.O. Box 3086, 3000 Foberezny Road, Oshkosh, Wisconsin, Town of Nekeem, Winnebago County.**

Dear Paul:

On behalf of Steve Taylor, Manager of Convention Facilities at the Experimental Aircraft Association, Sam's Rotary Drillers, Inc. (SAMS), proposes to construct a high-capacity well to supply water to campers and a future shower facility at the above mentioned address. The enclosed application is for this high-capacity well. SAMS proposes to construct the well as soon as possible as it will be needed for AirVenture Convention in July 2014.

There are twenty-two other water wells on the property at this time. Three wells on the property will be filled and sealed upon completion of this high-capacity well. They are BH 528, KV 052 and KV 043. I searched the Well Construction Reports for the area and was able to find the most of the reports, which I have included with this application. If you have any questions regarding this project, please contact me at (920) 326-5193.

Sincerely,

**SAM'S WELL DRILLING, INC.**

Jeff Kramer, P.G.  
Hydrogeologist

RECEIVED-DNR  
APR 25 2014  
DRINKING WATER & GW

Agent authorized to submit this application on behalf of the Convention Facilities Manager, Steve Taylor of the Experimental Aircraft Association.

**[www.samswelldrilling.com](http://www.samswelldrilling.com)**

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High Capacity, School or Wastewater Treatment Plant  
Well Approval Application

Form 3300-255 (R 7/05)

APR 25 2014

Page 1 of 6

Notice: Prior department approval is required for the construction, reconstruction or operation of a high capacity well or system of high capacity wells, a school well or a wastewater treatment plant well in accordance with Section NR 812.09(4)(a), Wisconsin Administrative Code. Personally identifiable information collected on this form, including such data as your name, address and phone number, will be used for management of department programs and is unlikely to be used for other purposes. This information will be addressable under Wisconsin's Open Records Laws, ss. 19.32 - 19.39, Wis. Stats.

Use this form to request an approval for installation of a well or wells on a high capacity property, seek approval to make other changes to a high capacity property or to modify a well on a high capacity property, as required by NR 812.09(4)(a), Wisconsin Administrative Code. Refer to definitions of high capacity well, high capacity property and high capacity well system on page 5.

This form is not intended to be used when seeking approval for construction or modification of wells serving water systems regulated under ch. NR 811, Wis. Adm. Code. Any water system serving 7 or more homes, 10 or more mobile homes, 10 or more apartments, 10 or more condominiums, or 10 or more duplexes is regulated under ch. NR 811, Wis. Adm. Code. See NR 811.01, Wis. Adm. Code for applicability requirements.

Applicant Information

Application Prepared By (Name and Title)

JEFF KRAMER / HYDROGEOLOGIST

Company

SAM'S WELL DRILLING

Street Address

P.O. Box 150

City

RANDOLPH

State

WI

ZIP Code

53956

Telephone Number

920-326-5193

Fax Number

920-326-5209

E-Mail Address

JEFFK@SAMSWELLDILLING.COM

Property Ownership Information

Property owner, if different than applicant (Name of Person and Title)

STEVE TAYLOR / MANAGER CONVENTION FACILITIES

Company

EAA AVIATION CENTER

Street Address

P.O. Box 3086

City

COAKESHA

State

WI

ZIP Code

54903-3086

Telephone Number

920-426-3086

Fax Number

920-426-6505

E-Mail Address

Well Operator Information

Well operator if different than owner (Name of Person and Title)

STEVE TAYLOR / MANAGER CONVENTION FACILITIES

Company

EAA AVIATION CENTER

Street Address

P.O. Box 3086

City

COAKESHA

State

WI

ZIP Code

54903-3086

Telephone Number

920-426-6813

Fax Number

920-426-6505

E-Mail Address

STAYLOR@EAA.ORG

Property Information

Enter the High Capacity Well File Number below. If the property is already a high capacity property, if the property is not designated as a high capacity property at the time of application, enter "NONE." NOTE: Find the file number in upper right hand corner of the most recent high capacity well approval, or use the compact disk of departmental well data that is issued to drillers and pump installers. On the compact disk, see "File location" in red print in "Location" section. File number format is as follows: (1 or 2 digits for county) - (1 digit for well classification) - (1 to 4 digits for assigned property no.).

County

WINNEBAGO

Town

NEKIMI

High Capacity Well File No.

71-8-8

Submittal Purpose

Check all that apply:

- ☒ Install one or more new wells with a capacity greater than 70 gallons per minute.
- ☐ Install one or more new wells with a capacity less than 70 gallons per minute on a high capacity property.
- ☐ Replace one or more wells with a capacity greater than 70 gallons per minute.
- ☐ Replace one or more wells with a capacity less than 70 gallons per minute on a high capacity property.
- ☐ Reconstruct one or more wells with a capacity greater than 70 gallons per minute.
- ☐ Reconstruct one or more wells with a capacity less than 70 gallons per minute on a high capacity property.
- ☐ Increase pumping rate in one or more wells to a rate greater than previously approved.
- ☐ Request continued operation of high capacity wells after a change in ownership. (No application fee required.)
- ☐ Renew a previous approval that has expired.
- ☐ Well (or wells) will serve a school or wastewater treatment plant. See definitions on page 5.
- ☐ Other, explain \_\_\_\_\_

**Site Status Information**

Determine the site status using the internet or the compact disk of departmental well data that is issued to drillers and pump installers and the information supplied by the property owner. Internet address is [dnr.wi.gov/org/water/dwg/dws.htm](http://dnr.wi.gov/org/water/dwg/dws.htm). Enter YES or NO for each of the following questions.

YES NO

- ☐ ☒ Has the property boundary changed since the most recent high capacity well approval was issued? If the property is not yet a high capacity property, check NO.
- ☐ ☒ Has there been a change in well ownership since the last approval was written?  
If YES, name of current owner: \_\_\_\_\_ Date of purchase: \_\_\_\_\_
- ☐ ☒ Has there been a change in well operator since the last approval was written?  
If YES, name of current operator: \_\_\_\_\_ Date of change: \_\_\_\_\_
- ☐ ☒ Will a proposed well be connected to a plumbing system that is supplied by other sources (other wells, municipal supply, etc.)? If YES, include a schematic drawing showing backflow protection.
- ☐ ☒ Is a proposed well within 1,200 feet of a landfill? Determine if there are any landfills nearby, using the well information compact disk FIND feature. Enter the township, range and section of the well location. If the well is near a section line, also check the adjacent section or sections.  
If YES, list the landfill site ID Number: \_\_\_\_\_ OR Landfill location: (Township/Range/Section) \_\_\_\_\_
- ☐ ☒ Is a proposed well on a property that has a contaminated site? If YES, list the BRRTS (Bureau for Remediation and Redevelopment Tracking System) Number here and specify if the site is open or closed:  
\_\_\_\_\_ ☐ Open ☐ Closed
- ☐ ☒ Is a proposed well on a property that has a groundwater use restriction recorded on the deed? If YES, list the BRRTS number, as assigned to the contaminated site by the DNR remediation and redevelopment program: \_\_\_\_\_
- ☐ ☒ Is a proposed well on a property that is listed on the department's registry of closed remediation sites for a groundwater use restriction? See compact disk or internet at [maps.dnr.state.wi.us/imf/dnrinf.jsp?site=brrts](http://maps.dnr.state.wi.us/imf/dnrinf.jsp?site=brrts). If YES, list the BRRTS Number here: \_\_\_\_\_
- ☐ ☒ Is a proposed well to be used for a public water supply system that serves 25 or more people? See definition of a "public water system" in the definitions section on page 5.
- ☒ ☐ Is a proposed well to be installed within a special casing area? Refer to the list of special casing areas that is published by the department and/or contact the regional DNR office.
- ☐ ☒ Has the number of wells or pumping capacity in an existing well increased since the most recent high capacity well approval was issued?
- ☒ ☐ Has the number of wells decreased since the most recent high capacity well approval? If the property is not yet a high capacity property, check NO.
- ☐ ☒ Is a non-pressurized storage vessel (i.e. reservoir) other than a pond proposed or in use?
- ☐ ☒ Will the well discharge directly to a storage pond?
- ☐ ☒ Is a pressurized tank with a capacity greater than 1,000 gallons proposed or in use?
- ☐ ☒ Is a proposed well within 1,200 feet of a quarry?
- ☐ ☒ Is a proposed well located in a floodplain or floodway?
- ☐ ☒ Are any existing well installations on the high capacity property out of compliance with Chapter NR 812, Wisconsin Administrative Code?
- ☐ ☒ Will the well be used as a source of bottled water?
- ☐ ☒ Are you seeking a variance to construct a well that has a capacity of less than 70 gallons per minute to low capacity well construction standards?
- ☒ ☐ Is the property served by a community water system?



**Existing Well Information**

Enter the following information on all existing wells on the property, if more than four wells, submit additional sheets:

Well Name Assigned by Well Owner (North Well, etc.):	WARBIRDS	OLLIE'S PARK	PAUL'S PARK	MINI MUSEUM A NORTH
Well Number Assigned by Owner (001, 002, etc.):	002	003	004	005
WI Unique Well Number or NA if no number:	BH521	BH522	BH523	BH524
Permanent DNR High Capacity Well Number or N/A if none:	88615	88616	88617	88618
Public Water System ID Number, if Public (if not public, NONE):	NONE	NONE	NONE	NONE
Potable or Non-Potable Use:	POTABLE	POTABLE	POTABLE	POTABLE
Type of Well (Irrigation, Industrial, Residential, etc.):	RECREATIONAL FACILITY	RECREATIONAL FACILITY	RECREATIONAL FACILITY	RECREATIONAL FACILITY
Requested Average Water Usage per Day in Gallons:	500	500	500	500
Requested Maximum Water Usage per Day in Gallons:	1000	1000	1000	1000
Seasonal? (April to October, Year Around, etc.):	APRIL TO OCTOBER	APRIL TO OCTOBER	APRIL TO OCTOBER	YEAR ROUND
Approved Pumping Capacity if Previously Approved (gpm):	25	25	25	25
Current Pump Type & Capacity (gpm):	SUBMERSIBLE/33	SUBMERSIBLE/30	SUBMERSIBLE/35	SUBMERSIBLE/33
Proposed Pump Type & Capacity if Change Requested (gpm):	33	30	35	33
Pump Discharge Type (Over Top of Casing Seal, Pitless, etc.):	OVER TOP OF CASING	OVER TOP OF CASING	OVER TOP OF CASING	PITLESS ADAPTOR
Discharge Location (Building Pressure Tank, Pond, etc.):	BUILDING PRESSURE TANK	BUILDING PRESSURE TANK	BUILDING PRESSURE TANK	BUILDING PRESSURE TANK
Height of Well Casing Above Ground in Inches:	12.0"	14.0"	12.0"	12.0"
Potential Contaminant Sources and Distance:				
Well Loc: Quarter Quarter Section or Government Lot Number	NW 1/4 of SW 1/4	SW 1/4 of NW 1/4	SE 1/4 of NE 1/4	SW 1/4 of NE 1/4
Section or French Long Lot No.	35	2	3	3
Township:	T 18 N	T 17 N	T 17 N	T 17 N
Range (Select E or W):	R 16 <input checked="" type="checkbox"/> E <input type="checkbox"/> W	R 16 <input checked="" type="checkbox"/> E <input type="checkbox"/> W	R 16 <input checked="" type="checkbox"/> E <input type="checkbox"/> W	R 16 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Latitude (Degrees and Minutes)	43° 59.251'	43° 58.610'	43° 58.593'	43° 58.647'
Longitude (Degrees and Minutes)	088° 33.629'	088° 33.611'	088° 34.040'	088° 34.099'
GPS Map Datum (WGS84, WTM91, etc.)	GPS008	GPS008	GPS008	GPS008
Include as much of the following information as practical for wells that do not have well construction records attached to the application, however if the well construction record is attached, applicant may leave the following rows blank.				
Date of Construction:	7/22/70	5/31/74	6/25/75	9/3/75
Drilled by (Name of Drilling Firm):	KEN SCHAEFER	WAGNER BROS.	WAGNER BROS.	WAGNER BROS.
Drilling Method(s) (Rotary, Percussion, Etc.):	CABLE TOOL	CABLE TOOL	CABLE TOOL	CABLE TOOL
Well Depth in Feet:	237.0'	182.0'	240.0'	240.0'
Upper Enlarged Drillhole Diameter in Inches and Depth in Feet:	10.0" 44.0' inches, feet	10.0" 42.0' inches, feet	10.0" 42.0' inches, feet	10.0" 47.0' inches, feet
Lower Drillhole Diameter in Inches and Depth in Feet:	6.0" 237.0' inches, feet	6.0" 182.0' inches, feet	6.0" 240.0' inches, feet	6.0" 240.0' inches, feet
Well Casing Diameter in Inches and Depth in Feet:	6.0" 61.0' inches, feet	6.0" 42.0' inches, feet	6.0" 42.0' inches, feet	6.0" 47.0' inches, feet
Well Casing Material and Wall Thickness:	STEEL / .280	STEEL / .280	STEEL / .280	STEEL / .280
Annular Space Material Between Casing and Drillhole Wall:	NEAT CEMENT GROUT	NEAT CEMENT GROUT	NEAT CEMENT GROUT	DELLERS MUD AND CUTTINGS
Is There a Well Screen (Y or N) If so, Screen Material?:	N	N	N	N

**Existing Well Information**

Enter the following information on all existing wells on the property, if more than four wells, submit additional sheets:

Well Name Assigned by Well Owner (North Well, etc.):	DOOLITTLE	NATURE CENTER	CHAPEL	WEST SHOWER
Well Number Assigned by Owner (001, 002, etc.):	006	007	008	009
WI Unique Well Number or NA if no number:	BH 525	NA	NA	BH 528
Permanent DNR High Capacity Well Number or N/A if none:	88619	NA	NA	88622
Public Water System ID Number, if Public (If not public, NONE):	NONE	NONE	NONE	NONE
Potable or Non-Potable Use:	POTABLE	POTABLE	POTABLE	POTABLE
Type of Well (Irrigation, Industrial, Residential, etc.):	RECREATIONAL FACILITY	RECREATIONAL FACILITY	RECREATIONAL FACILITY	RECREATIONAL FACILITY
Requested Average Water Usage per Day in Gallons:	500	500	500	500
Requested Maximum Water Usage per Day in Gallons:	1000	1000	1000	1000
Seasonal? (April to October, Year Around, etc.):	APRIL TO OCTOBER	APRIL TO OCTOBER	APRIL TO OCTOBER	APRIL TO OCTOBER
Approved Pumping Capacity if Previously Approved (gpm):	30	NA	NA	35
Current Pump Type & Capacity (gpm):	SUBMERSIBLE/33	SUBMERSIBLE/33	SUBMERSIBLE/12	SUBMERSIBLE/25
Proposed Pump Type & Capacity if Change Requested (gpm):	33	33	12	25
Pump Discharge Type (Over Top of Casing Seal, Pitless, etc.):	PITLESS ADAPTOR	OVER TOP OF CASING	PITLESS ADAPTOR	OVER TOP OF CASING
Discharge Location (Building Pressure Tank, Pond, etc.):	BUILDING PRESSURE TANK	PRESSURE TANK	BUILDING PRESSURE TANK	BUILDING PRESSURE TANK
Height of Well Casing Above Ground in Inches:	14.0"	12.0"	12.0"	12.0"
Potential Contaminant Sources and Distance:				
Well Loc: Quarter Quarter Section	SW 1/4 of NE 1/4	SW 1/4 of SE 1/4	SW 1/4 of SE 1/4	SW 1/4 of NW 1/4
or Government Lot Number				
Section or French Long Lot No.	3	34	34	3
Township:	T 17 N	T 17 N	T 17 N	T 17 N
Range (Select E or W):	R 16 <input checked="" type="checkbox"/> E <input type="checkbox"/> W	R 16 <input checked="" type="checkbox"/> E <input type="checkbox"/> W	R 16 <input checked="" type="checkbox"/> E <input type="checkbox"/> W	R 16 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Latitude (Degrees and Minutes)	43° 58.602'	43° 59.863'	43° 59.076'	43° 58.641'
Longitude (Degrees and Minutes)	088° 34.367'	088° 34.328'	088° 34.401'	088° 34.689'
GPS Map Datum (WGS84, WTM91, etc.)	GP5008	GP5008	GP5008	GP5008
Include as much of the following information as practical for wells that do not have well construction records attached to the application, however if the well construction record is attached, applicant may leave the following rows blank.				
Date of Construction:	7/21/78	10/30/79	7/24/81	7/14/02
Drilled by (Name of Drilling Firm):	WERNER BROS.	UNKNOWN	UNKNOWN	CLARK WELL DRILLING
Drilling Method(s) (Rotary, Percussion, Etc.):	CABLE TOOL	UNKNOWN	UNKNOWN	ROTARY
Well Depth in Feet:	52.0'	122.0'	262.0'	205.0'
Upper Enlarged Drillhole Diameter in Inches and Depth in Feet:	10.0" 43.0' inches, feet	UNKNOWN inches, feet	UNKNOWN inches, feet	10.0" 60.0' inches, feet
Lower Drillhole Diameter in Inches and Depth in Feet:	6.0" 52.0' inches, feet	UNKNOWN inches, feet	UNKNOWN inches, feet	6.0" 205.0' inches, feet
Well Casing Diameter in Inches and Depth in Feet:	6.0" 43.0' inches, feet	6.0" UNKNOWN inches, feet	6.0" UNKNOWN inches, feet	6.0" 60.0' inches, feet
Well Casing Material and Wall Thickness:	STEEL / .280	STEEL / .280	STEEL / .280	STEEL / .280
Annular Space Material Between Casing and Drillhole Wall:	NEAT CEMENT GROUT	UNKNOWN	UNKNOWN	NEAT CEMENT GROUT
Is There a Well Screen (Y or N) If so, Screen Material?:	N	N	N	N

**Existing Well Information**

Enter the following information on all existing wells on the property, if more than four wells, submit additional sheets:

Well Name Assigned by Well Owner (North Well, etc.):	2 AUG'S CLASSIC CAFE	HANGER CAFE	2 AUG'S ULTRALIGHT CAFE	MUSEUM LAKE
Well Number Assigned by Owner (001, 002, etc.):	010	011	012	014
WI Unique Well Number or NA if no number:	NA	NA	NA	NA
Permanent DNR High Capacity Well Number or N/A if none:	NA	674	675	677
Public Water System ID Number, if Public (if not public, NONE):	NONE	NONE	NONE	NONE
Potable or Non-Potable Use:	POTABLE	POTABLE	POTABLE	NON-POTABLE
Type of Well (Irrigation, Industrial, Residential, etc.):	RECREATIONAL FACILITY	RECREATIONAL FACILITY	RECREATIONAL FACILITY	RECREATIONAL FACILITY
Requested Average Water Usage per Day in Gallons:	500	500	500	500
Requested Maximum Water Usage per Day in Gallons:	1000	1000	1000	1000
Seasonal? (April to October, Year Around, etc.):	APRIL TO OCTOBER	APRIL TO OCTOBER	APRIL TO OCTOBER	YEAR ROUND
Approved Pumping Capacity if Previously Approved (gpm):	NA	10	10	NA
Current Pump Type & Capacity (gpm):	SUBMERSIBLE/12	SUBMERSIBLE/12	SUBMERSIBLE/12	SUBMERSIBLE/33
Proposed Pump Type & Capacity if Change Requested (gpm):	12	12	12	33
Pump Discharge Type (Over Top of Casing Seal, Pileless, etc.):	OVER TOP OF CASING	OVER TOP OF CASING	OVER TOP OF CASING	OVER TOP OF CASING
Discharge Location (Building Pressure Tank, Pond, etc.):	BUILDING PRESSURE TANK	BUILDING PRESSURE TANK	BUILDING PRESSURE TANK	POND
Height of Well Casing Above Ground in Inches:	120"	120"	120"	120"
Potential Contaminant Sources and Distance:				
Well Loc: Quarter Quarter Section or Government Lot Number	NW 1/4 of NW 1/4	SW 1/4 of NW 1/4	NW 1/4 of SW 1/4	SW 1/4 of SW 1/4
Section or French Long Lot No.	2	2	2	34
Township:	T 17 N	T 17 N	T 17 N	T 17 N
Range (Select E or W):	R 16 <input checked="" type="checkbox"/> E <input type="checkbox"/> W	R 16 <input checked="" type="checkbox"/> E <input type="checkbox"/> W	R 16 <input checked="" type="checkbox"/> E <input type="checkbox"/> W	R 16 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Latitude (Degrees and Minutes)	43° 58.780	43° 58.466	43° 58.249	43° 58.998
Longitude (Degrees and Minutes)	088° 33.608	088° 33.616	088° 33.619	088° 43.764
GPS Map Datum (WGS84, WTM91, etc.):	GP5008	GP5008	GP5008	GP5008
Include as much of the following information as practical for wells that do not have well construction records attached to the application, however if the well construction record is attached, applicant may leave the following rows blank.				
Date of Construction:	7/31/82	6/28/87	6/12/89	UNKNOWN
Drilled by (Name of Drilling Firm):	UNKNOWN	UNKNOWN	UNKNOWN	UNKNOWN
Drilling Method(s) (Rotary, Percussion, Etc.):	ROTARY	ROTARY	ROTARY	ROTARY
Well Depth in Feet:	205.0	150.0	203.0	UNKNOWN
Upper Enlarged Drillhole Diameter in Inches and Depth in Feet:	UNKNOWN inches, feet	UNKNOWN inches, feet	UNKNOWN inches, feet	UNKNOWN inches, feet
Lower Drillhole Diameter in Inches and Depth in Feet:	UNKNOWN inches, feet	UNKNOWN inches, feet	UNKNOWN inches, feet	UNKNOWN inches, feet
Well Casing Diameter in Inches and Depth in Feet:	6.0" UNKNOWN inches, feet	6.0" UNKNOWN inches, feet	6.0" UNKNOWN inches, feet	6.0" UNKNOWN inches, feet
Well Casing Material and Wall Thickness:	STEEL / .280	STEEL / .280	STEEL / .280	STEEL / .280
Annular Space Material Between Casing and Drillhole Wall:	UNKNOWN	UNKNOWN	UNKNOWN	UNKNOWN
Is There a Well Screen (Y or N) If so, Screen Material?:	N	N	N	N

**Existing Well Information**

Enter the following information on all existing wells on the property, if more than four wells, submit additional sheets:

Well Name Assigned by Well Owner (North Well, etc.):	JACOBS HOUSE ULTRALIGHT BARN	LAMBERT HOUSE	JOSEPHINE JEASON	RIPPLE AVENUE WITTMAN ROAD
Well Number Assigned by Owner (001, 002, etc.):	015	016	020	023
WI Unique Well Number or NA if no number:	NA	NA	NA	NA
Permanent DNR High Capacity Well Number or N/A if none:	678	679	1524	1527
Public Water System ID Number, if Public (if not public, NONE):	NONE	NONE	NONE	NONE
Potable or Non-Potable Use:	POTABLE	POTABLE	POTABLE	POTABLE
Type of Well (Irrigation, Industrial, Residential, etc.):	RECREATIONAL FACILITY	RECREATIONAL FACILITY	RECREATIONAL FACILITY	RECREATIONAL FACILITY
Requested Average Water Usage per Day in Gallons:	500	500	500	500
Requested Maximum Water Usage per Day in Gallons:	1000	1000	1000	1000
Seasonal? (April to October, Year Around, etc.):	APRIL TO OCTOBER	APRIL TO OCTOBER	APRIL TO OCTOBER	APRIL TO OCTOBER
Approved Pumping Capacity If Previously Approved (gpm):	10	10	10	20
Current Pump Type & Capacity (gpm):	SUBMERSIBLE/12	SUBMERSIBLE/12	SUBMERSIBLE/12	SUBMERSIBLE/12
Proposed Pump Type & Capacity If Change Requested (gpm):	12	12	12	NA
Pump Discharge Type (Over Top of Casing Seal, Pitless, etc.):	PITLESS	PITLESS	PITLESS	OVER TOP OF CASING
Discharge Location (Building Pressure Tank, Pond, etc.):	BUILDING PRESSURE TANK	BUILDING PRESSURE TANK	BUILDING PRESSURE TANK	BUILDING PRESSURE TANK
Height of Well Casing Above Ground in Inches:	12.0"	12.0"	12.0"	12.0"
Potential Contaminant Sources and Distance:				
Well Loc: Quarter Quarter Section or Government Lot Number	SW 1/4 of NW 1/4	NW 1/4 of NW 1/4	SW 1/4 of SW 1/4	NW 1/4 of NW 1/4
Section or French Long Lot No.	2	3	3	11
Township:	T 17 N	T 17 N	T 17 N	T 17 N
Range (Select E or W):	R 16 <input checked="" type="checkbox"/> E <input type="checkbox"/> W	R 16 <input checked="" type="checkbox"/> E <input type="checkbox"/> W	R 16 <input checked="" type="checkbox"/> E <input type="checkbox"/> W	R 16 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Latitude (Degrees and Minutes)	43° 58.259'	43° 58.872'	43° 58.536'	43° 57.910'
Longitude (Degrees and Minutes)	088° 38.743'	088° 34.782'	088° 34.892'	088° 33.588'
GPS Map Datum (WGS84, WTM91, etc.)	GP5008	GP5008	GP5008	GP5008
Include as much of the following information as practical for wells that do not have well construction records attached to the application, however if the well construction record is attached, applicant may leave the following rows blank.				
Date of Construction:	UNKNOWN	12/1/61	UNKNOWN	UNKNOWN
Drilled by (Name of Drilling Firm):	UNKNOWN	UNKNOWN	UNKNOWN	UNKNOWN
Drilling Method(s) (Rotary, Percussion, Etc.):	UNKNOWN	UNKNOWN	UNKNOWN	UNKNOWN
Well Depth in Feet:	163.0'	235.0'	200.0'	202.0'
Upper Enlarged Drillhole Diameter in Inches and Depth in Feet:	80 inches, 47.0 feet	UNKNOWN inches, feet	UNKNOWN inches, feet	UNKNOWN inches, feet
Lower Drillhole Diameter in Inches and Depth in Feet:	60 inches, 163.0 feet	UNKNOWN inches, feet	UNKNOWN inches, feet	UNKNOWN inches, feet
Well Casing Diameter in Inches and Depth in Feet:	6.0 inches, 47.0 feet	6.0 inches, UNKNOWN feet	4.0 inches, UNKNOWN feet	6.0 inches, UNKNOWN feet
Well Casing Material and Wall Thickness:	STEEL/.280	STEEL/.280	STEEL/.237	STEEL/.280
Annular Space Material Between Casing and Drillhole Wall:	UNKNOWN	UNKNOWN	UNKNOWN	UNKNOWN
Is There a Well Screen (Y or N) If so, Screen Material?:	N	N	N	N

**Existing Well Information**

Enter the following information on all existing wells on the property, if more than four wells, submit additional sheets:

Well Name Assigned by Well Owner (North Well, etc.):	DAVID JERSON	STITTS SHOWER	DUMP STATION	STADTMUELLER
Well Number Assigned by Owner (001, 002, etc.):	024	025	027	027
WI Unique Well Number or NA if no number:	NA	KV052	KV043	NA
Permanent DNR High Capacity Well Number or N/A if none:	1528	1819	1820	681
Public Water System ID Number, if Public (if not public, NONE):	NONE	NONE	NONE	NONE
Potable or Non-Potable Use:	POTABLE	POTABLE	POTABLE	POTABLE
Type of Well (Irrigation, Industrial, Residential, etc.):	RECREATIONAL FACILITY	RECREATIONAL FACILITY	RECREATIONAL FACILITY	RECREATIONAL FACILITY
Requested Average Water Usage per Day in Gallons:	500	500	500	500
Requested Maximum Water Usage per Day in Gallons:	1000	1000	1000	1000
Seasonal? (April to October, Year Around, etc.):	YEAR ROUND	APRIL TO OCTOBER	APRIL TO OCTOBER	YEAR ROUND
Approved Pumping Capacity if Previously Approved (gpm):	10	10	10	10
Current Pump Type & Capacity (gpm):	SUBMERSIBLE/12	SUBMERSIBLE/35	SUBMERSIBLE/33	SUBMERSIBLE/12
Proposed Pump Type & Capacity if Change Requested (gpm):	12	35	33	12
Pump Discharge Type (Over Top of Casing Seal, Pitless, etc.):	PITLESS	PITLESS	PITLESS	PITLESS
Discharge Location (Building Pressure Tank, Pond, etc.):	BUILDING PRESSURE TANK	BUILDING PRESSURE TANK	BUILDING PRESSURE TANK	BUILDING PRESSURE TANK
Height of Well Casing Above Ground in Inches:	16.0'	16.0'	14.0"	12.0
Potential Contaminant Sources and Distance:				
Well Loc: Quarter Quarter Section or Government Lot Number	SW 1/4 of SW 1/4	NE 1/4 of SW 1/4	SE 1/4 of SW 1/4	NE 1/4 of NE 1/4
Section or French Long Lot No.	3	3	3	10
Township:	T 17 N	T 17 N	T 17 N	T 17 N
Range (Select E or W):	R 16 <input checked="" type="checkbox"/> E <input type="checkbox"/> W	R 16 <input checked="" type="checkbox"/> E <input type="checkbox"/> W	R 16 <input checked="" type="checkbox"/> E <input type="checkbox"/> W	R 16 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Latitude (Degrees and Minutes)	43° 58.086'	43° 58.412'	43° 58.082'	43° 58.297'
Longitude (Degrees and Minutes)	088° 34.812'	088° 34.612'	088° 34.613'	088° 33.728'
GPS Map Datum (WGS84, WTM91, etc.)	GPS008	GPS008	GPS008	GPS008
Include as much of the following information as practical for wells that do not have well construction records attached to the application, however if the well construction record is attached, applicant may leave the following rows blank.				
Date of Construction:	UNKNOWN	6/14/96	6/11/96	6/15/77
Drilled by (Name of Drilling Firm):	UNKNOWN	SAMS	SAMS	UNKNOWN
Drilling Method(s) (Rotary, Percussion, Etc.):	UNKNOWN	ROTARY	ROTARY	UNKNOWN
Well Depth in Feet:	UNKNOWN	277.0	302.0	130.0
Upper Enlarged Drillhole Diameter in Inches and Depth in Feet:	UNKNOWN	8.8" 63.0'	8.8" 63.0'	UNKNOWN
Lower Drillhole Diameter in Inches and Depth in Feet:	UNKNOWN	6.0" 277.0'	6.0" 302.0'	UNKNOWN
Well Casing Diameter in Inches and Depth in Feet:	6.0	6.0" 63.0'	6.0" 63.0'	6.0 UNKNOWN
Well Casing Material and Wall Thickness:	STEEL 1.280	STEEL 1.280	STEEL 1.280	STEEL 1.280
Annular Space Material Between Casing and Drillhole Wall:	UNKNOWN	NEAT CEMENT GROUT	NEAT CEMENT GROUT	UNKNOWN
Is There a Well Screen (Y or N) If so, Screen Material?:	N	N	N	N



**Existing Well Information**

Enter the following information on all existing wells on the property, if more than four wells, submit additional sheets:

Well Name Assigned by Well Owner (North Well, etc.):	MINI MUSEUM B	CAMP GROUND		
Well Number Assigned by Owner (001, 002, etc.):	028	029		
WI Unique Well Number or NA if no number:	TV055	WP714		
Permanent DNR High Capacity Well Number or N/A if none:	67683	70829		
Public Water System ID Number, if Public (if not public, NONE):	NONE	NONE		
Potable or Non-Potable Use:	POTABLE	POTABLE		
Type of Well (Irrigation, Industrial, Residential, etc.):	RECREATIONAL FACILITY	RECREATIONAL FACILITY		
Requested Average Water Usage per Day in Gallons:	500	504,000		
Requested Maximum Water Usage per Day in Gallons:	1000	576,000		
Seasonal? (April to October, Year Around, etc.):	YEAR ROUND	APRIL TO OCTOBER		
Approved Pumping Capacity if Previously Approved (gpm):	10	400		
Current Pump Type & Capacity (gpm):	SUBMERSIBLE/33	SUBMERSIBLE/400		
Proposed Pump Type & Capacity if Change Requested (gpm):	33	NA		
Pump Discharge Type (Over Top of Casing Seal, Pitless, etc.):	PITLESS	OVER TOP OF CASING		
Discharge Location (Building Pressure Tank, Pond, etc.):	BUILDING PRESSURE TANK	BUILDING PRESSURE TANK		
Height of Well Casing Above Ground in Inches:	14.0	24.0		
Potential Contaminant Sources and Distance:	BUILDING OVERHANG 100'	BUILDING OVERHANG 10.0		
Well Loc: Quarter Quarter Section or Government Lot Number	SW 1/4 of NE 1/4	SW 1/4 of NE 1/4	1/4 of	1/4 of
Section or French Long Lot No.	3	3		
Township:	T 17 N	T 17 N		
Range (Select E or W):	R 16 E	R 16 E		
Latitude (Degrees and Minutes)	43° 58.638'	43° 58.488'		
Longitude (Degrees and Minutes)	088° 34.114'	088° 34.068'		
GPS Map Datum (WGS84, WTM91, etc.)	GP5008	GP5008		
Include as much of the following information as practical for wells that do not have well construction records attached to the application, however if the well construction record is attached, applicant may leave the following rows blank.				
Date of Construction:	6/7/05	4/15/10		
Drilled by (Name of Drilling Firm):	JAM'S	JAM'S		
Drilling Method(s) (Rotary, Percussion, Etc.):	ROTARY	ROTARY		
Well Depth in Feet:	387.0	686.0		
Upper Enlarged Drillhole Diameter in Inches and Depth in Feet:	8.8" 348.0' inches, feet	12.3 419.0 7.8 inches, 636.0 feet inches, feet		
Lower Drillhole Diameter in Inches and Depth in Feet:	6.0" 387.0' inches, feet	6.0 inches, 686.0 feet inches, feet		
Well Casing Diameter in Inches and Depth in Feet:	6.0" 348.0' inches, feet	6.0 419.0 inches, feet inches, feet		
Well Casing Material and Wall Thickness:	STEEL/.280	STEEL/.322		
Annular Space Material Between Casing and Drillhole Wall:	NEAT CEMENT GROUT	NEAT CEMENT GROUT		
Is There a Well Screen (Y or N) If so, Screen Material?:	N	N		

**Proposed Well Information**

Enter the following information on all proposed wells on the property, if more than two wells or alternate construction, submit additional sheets:

Well Name Assigned by Well Owner (North Well, etc.):	STITS ROAD WELL	
Well Number Assigned by Owner (001, 002, etc.):	030	
Well Loc: Quarter Quarter Section or French Long Lot Number	SE 1/4 of NW 1/4 of Section 3	1/4 of 1/4 of Section
Township & Range (Select E or W)	T 17 N, R 16 <input checked="" type="checkbox"/> E <input type="checkbox"/> W	T N, R <input type="checkbox"/> E <input type="checkbox"/> W
Latitude (Degrees and Minutes)	43 ° 58.329	
Longitude (Degrees and Minutes)	088 ° 34.608	
GPS Map Datum (WGS84, WTM91, etc.):	GPR5008	
Type of Well (Irrigation, Industrial, Residential, etc.):	RECREATIONAL FACILITY	<input checked="" type="checkbox"/> Potable <input type="checkbox"/> Non-Potable
Drilling Method(s) (Rotary, Percussion, etc.):	MUD ROTARY	Type: <input type="checkbox"/> Potable <input type="checkbox"/> Non-Potable
Anticipated Geological Materials and Depths that Are Expected During Drilling:		
Material and Depth Interval:	CLAY + GRAVEL from 0' to 12	LIMESTONE from 231' to 314
Material and Depth Interval:	SAND + GRAVEL from 12' to 48	RED SANDSTONE from 314' to 327
Material and Depth Interval:	LIMESTONE from 48' to 187	SANDSTONE from 327' to 1000
Material and Depth Interval:	SANDSTONE from 187' to 222	
Material and Depth Interval:	SHALE from 222' to 231	
Drillhole Diameter and Anticipated Depth Intervals:		
Diameter and Depth Interval:	14.0 from 0' to 400.0	
Diameter and Depth Interval:	10.0 from 400.0' to 1000.0	
Diameter and Depth Interval:		
Permanent Casing or Liner Diameter and Wall Thickness at Anticipated Depth Intervals:		
Diameter and Wall Thickness at Depth Interval:	10.0 diam/ .365" thick 0' to 400.0	" diam/ " thick 0' to
Diameter and Wall Thickness at Depth Interval:	" diam/ " thick ' to	" diam/ " thick ' to
Permanent Casing or Liner Material, If Used:		
Casing Joints (Welded, T and C, etc.):	WELDED	
Material and Weight at Depth Interval:	STEEL 140 lbs/foot 0' to 400.0	/ lbs/foot 0' to
Material and Weight at Depth Interval:	/ lbs/foot ' to	/ lbs/foot ' to
Screen Material, Slot Size in Inches and Depth Interval or N/A if none:	NA	
Casing to Screen Joint (Welded, T and C, K Packer, etc.):	NA	
Annular Space Material Including Filter Pack Material, If Used:		
Material and Depth Interval:	NEAT CEMENT GROUT 0' to 400.0	/ 0' to
Material and Depth Interval:		/ ' to
Proposed Average Water Usage Per Day in Gallons:	504,000	350 GPM
Proposed Maximum Water Usage Per Day in Gallons:	914,400	635 GPM
Seasonal? (April to October, Year Around, etc.):	APRIL TO OCTOBER	
Proposed Pump Type & Capacity (gpm):	SUBMERSIBLE / 400 GPM	
Discharge Type (Over Top of Casing Seal, Pitless Adapter or Unit):	OVER TOP OF CASING	
Discharge Location (Building Pressure Tank, Pond, etc.):	BUILDING PRESSURE TANK	
Distance and Direction to Nearest Public Utility Well & Well Name:	3.0 MILES NORTHWEST, TOWN OF ALEGMA LN 753	
Distance to Other Potential Contaminant Sources:	2.5 MILES SOUTH WEST, LIL. GIANT EXCAVATING LANDFILL 471015820	
Distance to Other Potential Contaminant Sources:		
Leave Blank, for Department use only		

**Required Attachments**

Form 3300-256 (R 7/05)

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1. Attach one of the maps described in A. or B., below. Plot the existing and proposed well locations on the map. For wells that have a Wisconsin Unique Well Number or a Permanent High Capacity Well Number, plot the well locations with one of those numbers.
  - A. Copy of a plat map with the property boundary clearly shown. If the property is contiguous with properties owned by the same owner in another township, include a copy of that township map too, showing the property boundaries. If the property owner listed on the plat map is different from the current owner, list the date or dates, that the current property owner purchased the property on the map.
  - B. Map of the property prepared by a licensed land surveyor and the property description as described by the surveyor.
2. Sketch map showing all of the following that are planned or exist within 300 feet of each proposed well: proposed well location; other wells; property boundary; wetlands; potential contaminant sources (septic tank and drainfield, petroleum storage tanks, sewer lines, etc.); buildings and north arrow. If no pertinent features to map within 300 feet of the proposed well, for example an irrigation well in the middle of a field, state that on the property map listed above and plot the well locations on that map.
3. Any well construction records available for existing wells on the property. Do not attach any well construction records for wells that are not on the property. If a Wisconsin Unique Well Number has not been assigned, write a well name or site well number on the record that correlates to the well name or number plotted on the maps.
4. For proposed wells with a capacity greater than 400 gallons per minute, include the performance curve or performance table that is provided by the pump manufacturer. If the pump will be a lineshaft turbine, provide a curve with the same rpm as the motor under full load and list the motor horsepower.
5. If more than one well is connected to a common plumbing system, also provide a schematic drawing of the system showing method of preventing backflow. This sketch must include the well discharge (pitless, over top of casing sanitary seal); the water line from the well; pressure tanks; sampling faucets; check valves; backflow preventers; air gaps; manually operated valves; water meters; pressure switches for pumps; and any other pertinent fittings. This schematic drawing must also identify which of these components are buried or above ground. If there is more than one check valve within the well casing, include in-well check valves on the schematic.
6. If reconstruction of an existing well is proposed, include a diagram of the current well construction and a diagram of the proposed construction.
7. If the application is for a high capacity well or wells, a \$500.00 check payable to the Department of Natural Resources, unless the application is only for continued operation after a change of ownership.

**Certification and Applicant Signatures**

If the application requests a variance for a well within 1,200 feet of a landfill, a well on a property with a groundwater use restriction, or any other variance to NR 812, Wis. Adm. Code, the property owner must sign the application. If the well operator will install a well on property that he or she does not own, the property owner must also sign the application. Otherwise, an agent of the owner may sign the application.

Unsigned and incomplete applications will not be approved.

By signing this form, the person signing this application certifies that to the best of his or her knowledge, all existing well installations on the property comply with ch. NR 812, Wis. Adm. Code. The person also certifies that to the best of his or her knowledge, all information in the application is accurate and correct.

Name - Print

JEFF KRAMER

Check Box

☐

Owner

☒

Agent of the Owner

Signature

*Jeff Kramer*

Company

SAMS WELL DRILLING

Date

4/24/14

Application submittal. Mail completed application and payment with all required attachments to DNR, Private Water Systems Section - DG/2, PO Box 7921, Madison WI 53707-7921.

**Definitions from Wisconsin Administrative Codes**

"High capacity well" means a well constructed on a high capacity property. [NR 812.07(51)]

"High capacity property" means one property on which a high capacity well system exists or is to be constructed. [NR 812.07(52)]

"High capacity well system" means one or more wells, drillholes or mine shafts used or to be used to withdraw water for any purpose on one property, if the total pumping or flowing capacity of all wells, drillholes or mine shafts on one property is 70 or more gallons per minute based on the pump curve at the lowest system pressure setting, or based on the flow rate. [NR 812.07(53)]

"Public water system" means a system for the provision to the public of piped water for human consumptions if such system has at least 15 service connections or regularly serves an average of at least 25 individuals daily at least 60 days per year. A public water system is either a community water system or a non-community water system. Such system includes: (a) Any collection, treatment, storage, and distribution facilities under control of the operator of such system and used primarily in connection with such system, and (b) Any collection or pretreatment storage facilities not under such control which are used primarily in connection with such system. [NR 812.07(80)]

"School" means a public or private educational facility in which a program of educational instruction is provided to children in any grade or grades from kindergarten through the 12th grade. Water systems serving athletic fields, school forests, environmental centers, home-based schools, day-care centers and Sunday schools are not school water systems. [NR 812.07(94)]

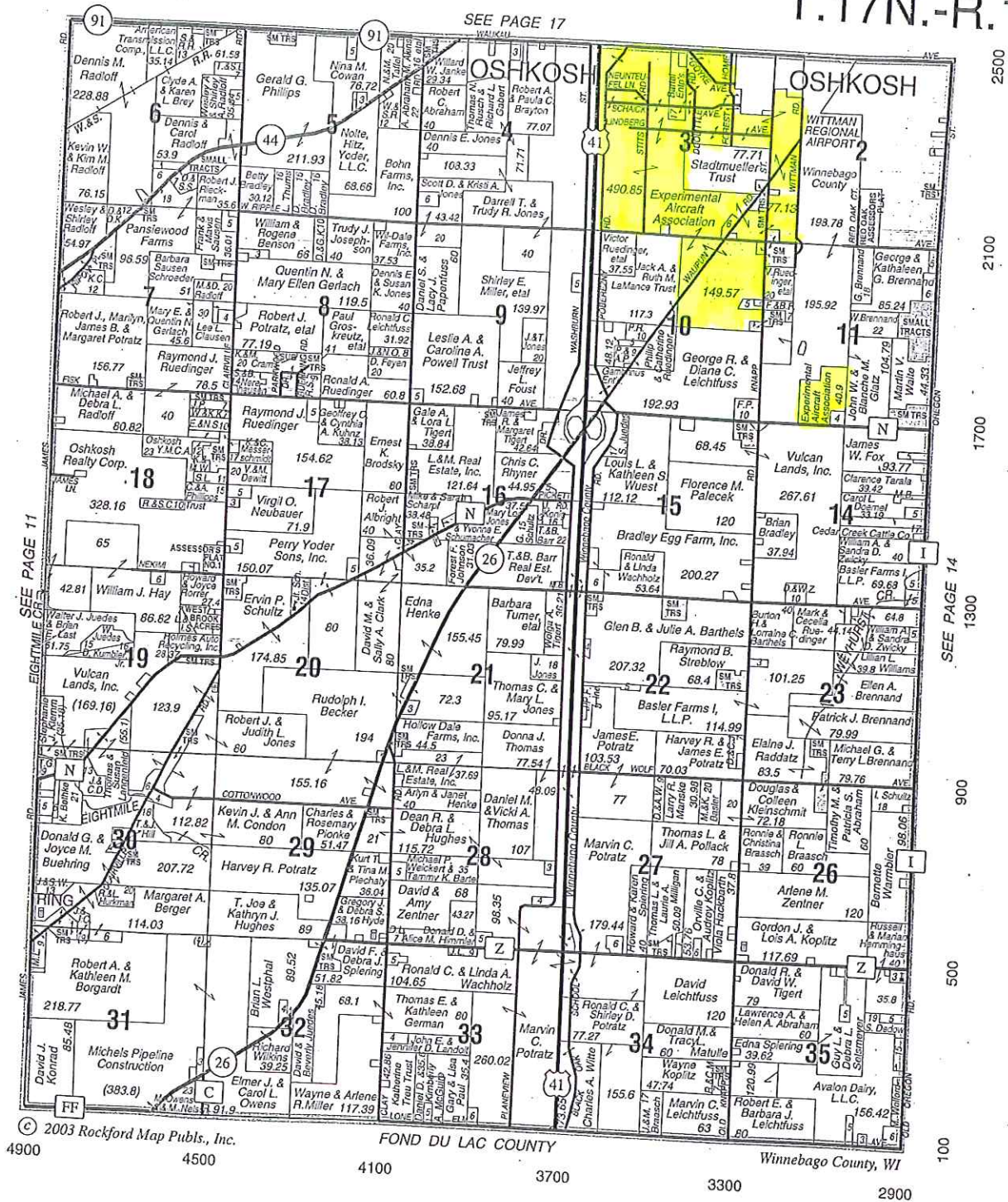
"Wastewater treatment plant" means any facility provided for the treatment of sanitary or industrial wastewater or both. The following types of facilities are excluded: (a) Facilities defined as private sewage systems in s. 145.01(12), Stats. (b) Pretreatment facilities from which effluent is directed to a public sewer system for treatment. (c) Industrial wastewater treatment facilities which consist solely of a land disposal system. [NR 114.03(14)]



NEKIMI

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T.17N.-R.16E.



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